

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Our Ref : AAD1908-040

Your Ref : SLL1333C

Date : 24.September 2019

AIG ASIA PACIFIC INSURANCE

Dear Sir/Madam,

ACCIDENT INVOLVING SHD9554T AND SLL1333C ON 06/08/19 08:45 PM ALONG BRADDELL RD TOWARDS UPPER SERANGOON RD

It appears that the above accident was caused by your insured's negligence. We, therefore seeking compensation from you for our financial loss as itemized below :-

1.	Cost of Repair (inclusive of 7% GST)	\$	1,053.82
2.	Loss of Rental for <u>3</u> days @ \$ <u>113.40</u> per day	\$	340.20
3.	Loss of Income for <u>3</u> days @ \$ <u>50.00</u> per day	\$	150.00
4.	LTA Search Fee	\$	7.49
5.	Survey Fee	\$	0.00
	Total	\$	1,551.51

We enclose a copy of the following documents for your consideration :-

GIA report lodged by our driver

Rental rate and mileage records

Certificate of Insurance

Authorization To Act

Original final repair bill

LTA Search Fee

Kindly let us have the discharge voucher within the next 14 days, failing which we shall proceed to hand over the conduct of this matter to our solicitors without further reference to you.

Yours Faithfully

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager

Tel No. : 6603 1250 (DID)

Note : Please email any further correspondence to claims@transcab.com.sg (6603 1259)

Asher Sng (LKKAUTO)

From: Asher Sng (LKKAUTO)
Sent: Thursday, 26 September 2019 9:37 AM
To: 'SARAGOH@HOTMAIL.COM'
Subject: ACCIDENT INVOLVING SLL 1333C AND SHD 9554T ON 06/08/2019
Attachments: TP VIDEO.wmv; ADDENDUM FORM.pdf

Our Ref: CC3/AIG19014003/Kea3

26 SEPT 2019

GOH LISHAN SARA

Dear Sir/Madam,

ACCIDENT INVOLVING SLL 1333C AND SHD 9554T ON 06/08/2019

We refer to the above accident where we are acting for AIG Asia Pacific Insurance Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD)(if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

**** Enclosed a copy of the third party dashcam video and it have proof that the accident happen on the 06/08/2019 20:45 along BRADDELL RD TOWARDS UPPER SERANGOON RD, kindly assist to sign the addendum form and return via email for our necessary action. Thank You.**

Please call us if you have further queries.

Yours faithfully,

Asher
Case Handler
DID: 6841 6051
FAX: 6741 4108
Email: Ashersng@lkkauto.com

c.c. *AIG Asia Pacific Insurance Pte Ltd*
(Motor Claims Dept)

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

Authorization To Act

We, Trans-cab Services Pte Ltd of Company Registration No. 200303878K hereby authorize Trans-cab Auto Services Pte Ltd to act on behalf to claim for all losses incurred for the accident involving SHD9554T and SLL1333C along BRADDELL RD TOWARDS UPPER SERANGOON RD on 06/08/19 08:45 PM.

In addition, we also hereby authorize the above payment to be made in favour of Trans-cab Auto Services Pte Ltd upon settlement.

Dated this 24 (day) of September 2019

Yours Faithfully

Trans-Cab Services Pte Ltd



Jasmine Tan

General Manager

RELEASE VOUCHER
(AIG Asia Pacific - Express Third Party Claim)

"We/I, **TRANS-CAB AUTO SERVICES PTE LTD** ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte Ltd **LKK AUTO CONSULTANTS PTE LTD** (name of surveyor) with respect to the amount claimed for **S\$1,053.82** (Repair Cost), **S\$326.80** (Loss of Use/Rental), **S\$7.49** (Disbursement) for vehicle no. **SHD 9554T** that was damaged pursuant to the accident which occurred on **06/08/2019** (date) along **BRADDELL RD TOWARDS UPPER SERANGOON RD** (location) involving vehicle no/s **SLL 1333C**.

This is pursuant to the inspection conducted on **08/08/2019** (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner **TRANS-CAB SERVICES PTE LTD** ("the third party claimant") of vehicle no. **SHD 9554T** make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to **SHD 9554T** (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this 12 (day) of Dec (month) 2019 (year)



KSC

KSC

Signed by appointed surveyor



for

Signed by "the workshop" (with chop)

Trans-Cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel: 6287 6666

Fax: 6287 7764

Co. Reg. No.: 201019626G

GST Reg. No.: 201019626G

Tax Invoice / Debit Note

TO: AIG ASIA PACIFIC INSURANCE PTE LTD 78 Shenton Way #07-16 CHARTIS Building 079120 Singapore ATTENTION:	INVOICE NO. : INV1909-160 DATE : 23. September 2019 REFERENCE NO : AAD1908-040 TERMS : Net 30 Days DUE DATE : 23. October 2019 PAGE : 1
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NO.	CODE	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
1.	6050101	REPAIR-SHD9554T; DOA 06.08.19(PART-BY-PART-19)	1	1,053.82	1,053.82

Total SGD Excl. GST : 984.88**7% GST : 68.94******** ONE THOUSAND FIFTY THREE AND EIGHTY TWO SGD ONLY ********Total SGD Incl. GST : 1,053.82**

1) All cheques should be crossed and made payable to "Trans-Cab Auto Services Pte Ltd"

2) Please quote our Invoice Number during payment.

3) We reserve the right to charge interest @ 1.5% per month on overdue invoice.

4) Any dispute as to the accuracy, charges etc of this invoice must be communicated within 10 days from the date hereof failing which it shall be deemed to have been unconditionally accepted.

E. & O. E.**THIS IS A COMPUTER GENERATED INVOICE WHICH REQUIRES NO SIGNATURE**

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

24 September, 2019

To Whom It May Concern

Dear Sir / Madam,

Accident on 06/08/19 08:45 PM at BRADDELL RD TOWARDS UPPER SERANGOON RD

1. We refer to the above-mentioned accident and wish to inform that Trans-Cab Services Pte Ltd is the registered owner of the taxi bearing vehicle registration no. SHD9554T. The taxi was hired to TAN SIEW ANG a registered hirer-operator of Trans-Cab Services Pte Ltd at the time of occurrence of the aforementioned accident at a rental rate \$113.4 per day (inclusive of GST).
2. Please be advised that the Taxi is insured with AXA INSURANCE PTE LTD on a third party basis at the material time of the accident.
3. Please liaise with us directly for any settlement of claims in respect of the said accident.

Yours faithfully,

Jasmine Tan
General Manager

Trans-Cab Services Pte Ltd

No. 2 Ang Mo Kio Street 63

Tel No.: 6287 6666 Fax No. 6281 1400

Co./GST Reg. No. 200303878K

06-08-2019

Dear Sir/Madam,

Please be informed that the taxi was undergo accident repair in the workshop as follow:

Date In	Date Out	Vehicle No.
Accident No.	AAD1908-040	Accident Date 06-08-2019
8/8/2019 13:00	8/8/2019 15:00	SHD9554T
9/16/2019 09:47	9/17/2019 14:00	SHD9554T

Yours Faithfully,

Trans-Cab Services Pte Ltd

Jasmine Tan

General Manager

[> Back to OneMotoring](#)**Vehicle Insurance Particulars Result**

Vehicle No.	Incident Date/Time	Insurance Company Name
SGM4198K	06 Aug 2019 / 13:45:00	NTUC INCOME INS CO-OP LTD
SLX9126T	07 Aug 2019 / 14:20:00	NTUC INCOME INS CO-OP LTD
SLL9797U	07 Aug 2019 / 12:15:00	NTUC INCOME INS CO-OP LTD
SGU5874T	07 Aug 2019 / 10:25:00	NTUC INCOME INS CO-OP LTD
SLL1333C	06 Aug 2019 / 20:45:00	AIG ASIA PACIFIC INSURANCE PTE. LTD.

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> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 07 Aug 2019 / 16:56:41

Receipt Date/Time : 07 Aug 2019 / 16:56:41

Tax Invoice/Receipt

Receipt No. : ITNET-00000-190807-002433

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SGM4198K As at 06 Aug 2019/13:45:00 Insurance Co: NTUC INCOME INS CO-OP LTD				
1	Insurance Enquiry - SGM4198K Enquiry Fee 20190807165509870254	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
Result of Insurance Enquiry - SLX9126T As at 07 Aug 2019/14:20:00 Insurance Co: NTUC INCOME INS CO-OP LTD				
2	Insurance Enquiry - SLX9126T Enquiry Fee 20190807165509920607	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
Result of Insurance Enquiry - SLL9797U As at 07 Aug 2019/12:15:00 Insurance Co: NTUC INCOME INS CO-OP LTD				
3	Insurance Enquiry - SLL9797U Enquiry Fee 20190807165509967080	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
Result of Insurance Enquiry - SGU5874T As at 07 Aug 2019/10:25:00 Insurance Co: NTUC INCOME INS CO-OP LTD				
4	Insurance Enquiry - SGU5874T Enquiry Fee 20190807165510009101	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
Result of Insurance Enquiry - SLL1333C As at 06 Aug 2019/20:45:00 Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
5	Insurance Enquiry - SLL1333C Enquiry Fee 20190807165510060893	7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	35.00	2.45	37.45
	Rounding Difference			0.00
	Total Amount Payable			37.45
Paid By				
	xxxxxxxxxxxx8127	Credit Card: Visa/MasterCard		37.45
	Total			37.45
	Cash Change			0.00

8/7/2019

	Patient	
Tendered Amount		37.45
Excess Refundable Amount		0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.



POSTING RECEIPT FOR REGISTERED ARTICLE(S)

Singapore Post Limited
(Reg. No. 192271C2M)
10 Raffles Road #
#06-30 Singapore Post Centre
Singapore 488608

Tel: 605
Fax: 6842 5114
To check delivery status or to raise an enquiry
on your registered article(s), please visit
www.singpost.com

NOTES:

- Separate forms are to be used for Insured and Non-Insured Registered Article.
- Please provide all information required and produce this receipt for all enquiries.
- Please tick where applicable. It shall be assumed no Advice of Receipt (AR) is required or delivery by air is requested if relevant * is left blank.
- Please indicate the return address on the item(s) to ensure prompt return in event of non-delivery to the addressee(s).
- Please post item(s) at the post office counter according to the sequence stated below.

1. Name & Address of Addressee GOH LISHAN SARA 12B HONGKONG STREET 11 #01-63 SINGAPORE 534073 (SL 1333C)		ART: (✓) Y () N Insurance*: () Y SS () N		By*: () AIR () SUR		For Official Use Only (Item numbers are printed in order of posting at counter)
2. Name & Address of Addressee Lim Debby 10 Cascaden Walk Four Seasons Park #13-01 Singapore 249693 (SFM 9212G)		Content:		By*: () AIR () SUR		
Sender's Address I have read, understood and agreed to the terms and conditions of posting overhead. I accept the maximum liability payable for Registered Mail Service and certify that all information provided by me is true and the item(s) does not contain any hazardous or prohibited item(s).		Insurance*: () Y SS () N		Content:		

P116

Name & Signature

Date

08/2014



MPR-02119260004898



MacPherson Road
Singapore Post Limited
10 Raffles Road #
Singapore Post Centre
Singapore 488608
GST Reg. No.: M2-0105651-9
Customer Service Hotline: 1605

Date/Time 17/9/2019 09:55	
No. Description	Amount(S\$)
1 Accept Registered Article Item 1. Ref: RC2825749675G Ctry: SG Transaction No.: 8135192600024	0.00
2 Sale of Postage Label (Domestic) Quantity: 1 Unit price: 2.54 Total GST: 0.17 Ref.: RC2825749675G Insurance: 0.00 Postage paid: 2.54 Transaction No.: 8135192600025	2.54
3 Accept Registered Article Item 1. Ref: RC2825749755G Ctry: SG Transaction No.: 8135192600026	0.00
4 Sale of Postage Label (Domestic) Quantity: 1 Unit price: 2.54 Total GST: 0.17 Ref.: RC2825749755G Insurance: 0.00 Postage paid: 2.54 Transaction No.: 8135192600027	2.54
Total GST	0.34
Total Amount	5.08
Cash	5.08

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